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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB/0651-0031

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TRANSMITTAL FORM

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5	pond to a collection of information	n unless it displays a valid OMB, control number
	Application Number	10/051,976
	Filing Date	January 16, 2002
	First Named Inventor	Derek J. HEI
	Art Unit	1651
	Examiner Name	D. Naff
	Attorney Docket Number	282172000902

ENCLOSURES (Check all that apply)				
Fee Transmittal Form + duplicate for fee processing (2 pages)	Drawing(s)		After Allowance Communication to TC	
Fee Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences	
Amendment/Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
After Final	Petition to Convert to a Provisional Application		Proprietary Information	
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Ac	Idress	Status Letter	
Extension of Time Request	Terminal Disclaimer	x	Other Enclosure(s) (please Identify below):	
Express Abandonment Request	Request for Refund		Form PTO/SB/08a/b + copy (2 ages)	
x Information Disclosure Statement, Supplemental (3 pages)	CD, Number of CD(s)		References, two (2) Return Receipt Postcard	
Certified Copy of Priority Document(s)	Landscape Table on CD			
Reply to Missing Parts/ Incomplete Application	Remarks	·		
Reply to Missing Parts under				
	TURE OF APPLICANT, ATTORN	EY, OR AG	ENT	
Firm Name MORRISON & FO	ERSTER LLP (Customer No. 2	25226)		
Signature				
Printed name Ilya Chorny				
Date November 7, 2005	F	eg. No. 56	6,519	

I hereby certify that this corresponder in an envelope addressed to: MS Am	nce is being deposited with the U.S. Postal Se endment, Commissioner for Ratents, P.O. Bo	ervice as Express Mail, Airbill No. EV 544971793 US, x 1450, Alexandria, VA 22313-1450, on the date
shown below.		
Dated: November 7, 2005	Signature: Vilongua	(Georgina Matos)

PTO/SB/17 (12-04v2)
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/ Effective on 12/08/2004.		Complete if Known					
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 481	8). Application Numbe	r 10	/051,976				
FEE TRANSMITTAL	Filing Date	Jai	nuary 16, 20	02			
For FY 2005	First Named Invent	tor De	rek J. HEI				
101112003	Examiner Name	D.	Naff				
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	16	51				
TOTAL AMOUNT OF PAYMENT (\$) 180.00	Attorney Docket No.	. 28	2172000902				
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order	None Other (plea	ase identify):				
x Deposit Account Deposit Account Number: 03-1952 Deposit			on & Foerst	er LLP			
For the above-identified deposit account, the Director	or is hereby authorized to	o: (check a	all that apply)				
x Charge fee(s) indicated below	<u> </u>	•		cept for the filing	fee		
Charge any additional fee(s) or underpayment	of X Credit any	y overpayn	nents				
fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
• •	SEARCH FEES E	XAMINA	TION FEES				
Small Entity	Small Entity	9	Small Entity				
		Fee (\$)	Fee (\$)	Fees Paid (\$)			
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Provisional 200 100	0 0	0	0				
2. EXCESS CLAIM FEES				Small Er			
Fee Description				Fee (\$) Fee (\$	_		
Each claim over 20 (including Reissues)				50 2:			
Each independent claim over 3 (including Reissues) Multiple dependent claims				200 100			
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Indep. Claims Extra Claims Fee (\$)	ee Paid (\$)						
2 -3= 0 × 200.00 =	0.00						
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of page							
listings under 37 CFR 1.52(e)), the application size fee sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) a		small entit	ty) for each ac	lditional 50			
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	(round up to a whole r	number) x	=		_		
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity of the control of the cont	liscount)			Fees Paid (\$)	!		
	Other (e.g., late filing surcharge): _1806 Submission of an Information Disclosure Statement 180.00						
SUBMITTED BY							
Signature	Registration No. (Attorney/Agent) 5	6,519	Telephone	(650) 813-5932			
Name (Print/Type) Ilya Choriy	(Amorrie)/Agent)	•	Date	November 7, 200			
<u> </u>	, ,			_			



hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 544971793 US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: November 7, 2005 Signature

(Georgina Matos)

Patent Docket No. 282172000902

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Derek J. HEI et al.

Serial No.: 10/051,976

Filing Date: January 16, 2002

For: METHODS AND DEVICES FOR THE

REMOVAL OF PSORALENS FROM

BLOOD PRODUCTS

Examiner: D. Naff

Group Art Unit: 1651

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. § 1.97 & 1.98

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. §1.97 and § 1.98, Applicants submit for consideration in the above-identified application the documents listed on the attached Form PTO/SB/08a/b. Copies of non-patent literature are submitted herewith. The Examiner is requested to make these documents of record.

This Supplemental Information Disclosure Statement is submitted:

With the application; accordingly, no fee or separate requirements are required.
Before the mailing of a first Office Action after the filing of a Request for Continued
Examination under § 1.114. However, if applicable, a certification under 37 C.F.R. § 1.97
(e)(1) has been provided.

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Withi	n three months of the application filing date or before mailing of a first Office Action
on the	e merits; accordingly, no fee or separate requirements are required. However, if
applic	cable, a certification under 37 C.F.R. § 1.97 (e)(1) has been provided.
After	receipt of a first Office Action on the merits but before mailing of a final Office Action
or No	etice of Allowance.
	A fee is required. A check in the amount of is enclosed.
\boxtimes	A fee is required. Accordingly, a Fee Transmittal form (PTO/SB/17) is attached to
	this submission in duplicate.
	A Certification under 37 C.F.R. § 1.97(e) is provided above; accordingly; no fee is
	believed to be due.
After	mailing of a final Office Action or Notice of Allowance, but before payment of the
issue	fee.
	A Certification under 37 C.F.R. § 1.97(e) is provided above and a check in the
	amount of is enclosed.
	A Certification under 37 C.F.R. § 1.97(e) is provided above and a Fee Transmittal
	form (PTO/SB/17 is attached to this submission in duplicate.)
	on the applied After or No

Applicants would appreciate the Examiner initialing and returning the Form PTO/SB/08a/b, indicating that the information has been considered and made of record herein.

The information contained in this Supplemental Information Disclosure Statement under 37 C.F.R. § 1.97 and § 1.98 is not to be construed as a representation that: (i) a complete search has been made; (ii) additional information material to the examination of this application does not exist; (iii) the information, protocols, results and the like reported by third parties are accurate or enabling; or (iv) the above information constitutes prior art to the subject invention.

In the unlikely event that the transmittal form is separated from this document and the Patent and Trademark Office determines that an extension and/or other relief (such as payment of a fee under 37 C.F.R. § 1.17 (p)) is required, Applicants petition for any required relief including extensions of time and authorize the Commissioner to charge the cost of such petition and/or other

fees due in connection with the filing of this document to <u>Deposit Account No. 03-1952</u> referencing <u>282172000902</u>.

Dated: November 7, 2005

Respectfully submitted,

Ilya Chorny

Registration No.: 56,519 MORRISON & FOERSTER LLP 755 Page Mill Road Palo Alto, California 94304-1018 (650) 813-5932 NOV 0-7 2005 B

Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet 1 of 1

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Complete if Known				
Application Number	10/051,976			
Filing Date	January 16, 2002			
First Named Inventor	Derek J. HEI			
Art Unit	1651			
Examiner Name	D. Naff			
Attorney Docket Number	282172000902			

U.S. PATENT DOCUMENTS							
Examiner	Cite	Document Number	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where		
Initials*	No.1	Number-Kind Code ² (if known)	MM-DD-YYYY	Applicant of Cited Document	Relevant Passages or Relevant Figures Appear		
	1.	US-6,951,713-B2	10-04-2005	Hei et al.			

	FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No.1	Foreign Patent Document Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶			

*EXAMINER: Initial if information considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

Examiner Initials	. I magazine journal serial symposium catalog etc.) date nadels) volume-issue numberis) buildisher city. I i i				
	2.	Communication/Office Action mailed on January 21, 2005, for European Patent Application No. 96921456.8 filed June 7, 1996, 4 pages.			
	3.	Office Action mailed on May 25, 2005, for co-pending U.S. Patent Application Serial No. 09/872,384, filed on June 1, 2001, 10 pages.			

^{*}EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Examiner	 Date	
Signature	Considered	

Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language Translation is attached.